



**CITY OF SOUTH AMBOY
MEMORIAL DAY
“PATRIOTIC POOCH CONTEST”
REGISTRATION FORM**

NAME OF PET _____

OWNER’S NAME _____

ADDRESS _____

PHONE _____ **EMAIL** _____

TELL US ABOUT ANY TALENTS YOUR PET HAS _____

I am the owner of the pet listed above and by signing this registration form, I agree to have my pet photographed and release the City of South Amboy to use both my image and my pets’ for publicity purposes.

Owner’s signature